

# MIDWEST CENTER

## FOR HEALTH SERVICES & POLICY RESEARCH

### ***Dr. Denise Hynes Receives 2002 Secretary Commendation for Advancement in Nursing***

On May 7, 2002 in Washington D.C., Denise Hynes, PhD, RN, Director, VIREC, Senior Investigator, MCHSPR, and Senior Investigator, CSP was among six people who were honored by the Secretary of Veterans Affairs Anthony Principi at the Awards Ceremony for the 2002 Excellence in Nursing and the Advancement in Nursing Programs during National Nurses Week. Dr. Hynes was the recipient of the Secretary's Commendation.

Dr. Hynes received the VA Secretary's Special Commendation Award recognizing her research contributions in end stage renal disease that showed how Medicare could save up to \$142 million annually using evidence-based anemia management strategies. ***Congratulations Dr. Hynes on a job well done!!!***

***Congratulations***

***Dr. Hynes***

***on a job***

***well done!!!***

### ***Denise Hynes Publishes Work on Cost Savings of Subcutaneous Epoetin***

End-stage renal disease patients routinely receive recombinant human erythropoietin (epoetin) as part of their treatment. Among its benefits are increased hematocrit levels and improved cardiovascular function and overall quality of life. However, epoetin treatment is costly. Medicare costs for treating end-stage renal disease patients with epoetin are estimated to have been more than \$600 million in 1998. Logically, because of the significant expense, strategies to reduce the cost of epoetin administration are being actively explored. In VA Cooperative Studies Program economic impact study led by Denise Hynes, Ph.D., R.N., investigators found that using subcutaneous rather than intravenous administration enabled significant reductions in anemia management treatment costs.

Data for the study was gathered from three primary sources. In a Department of Veterans Affairs randomized controlled trial led by James Kaufman, M.D. and conducted in hemodialysis units at 24 Department of Veterans Affairs medical centers (208 patients), a one-third less dose of recombinant human epoetin was shown to attain recommended target hematocrit levels of 30% to 33% when administered subcutaneously compared with intravenously. The half-life of epoetin is prolonged with subcutaneous administration suggesting that lower doses could be used. (The National Kidney Foundation Dialysis Outcomes Quality Initiative guidelines have since recommended a target hematocrit level of 33% to 36%.) Data were also gathered from the 1998 Centers for Medicare and Medicaid Services' End-Stage Renal Disease Core Indicators Project (5166 patients) and 1997-1998 Medicare claims files.

The investigators used an economic cost projection model to estimate potential savings to the Medicare End-Stage Renal Disease Program that could occur during a transition from intravenous to subcutaneous administration of epoetin among hemodialysis patients. To model the transition process, they estimated the Medicare savings that might occur if 25%, 50%, 75%, and 100% of patients who received intravenous epoetin switched to the subcutaneous route. Medicare cost savings were estimated at \$47 to \$142 million annually as 25% to 75% of hemodialysis patients who received epoetin intravenously switched to subcutaneous administration while reducing the dose by 32%. The authors project that a minimal reduction (10%) in epoetin dose would result in Medicare cost savings of an estimated \$15 to \$44 million annually. They also point out that for the transition to occur, consensus among stakeholders is needed, especially among patients whose treatment satisfaction and health-related quality of life would be most affected.

The investigative team included VA researchers: Kevin Stroupe, Ph.D., Domenic Reda, Ph.D. and William Henderson, Ph.D. from Hines, James Kaufman, M.D. from the Boston VA and John Feussner, CRADO; and CMS researchers Joel Greer, Ph.D. Diane Frankenfield, Ph.D., William Owen, M.D., Michael Rocco, M.D., Jay Wish, and Jeffrey Kang, M.D. The impact study was funded by the VA Cooperative Studies Program (CSP392 Impact). The results of this study are reported in "Potential Cost Savings of Erythropoietin Administration in End-Stage-Renal Disease" by Denise M. Hynes et al., published in *The American Journal of Medicine*, February 28, 2002, Volume 112, Number 3, published by Elsevier Science. The full text of this article is available upon request.

Spring-Summer  
2002  
Volume VIII  
Number 2  
Page 1

N  
E  
W  
S  
B  
R  
I  
E  
F

## *Research News...*

### *Dr. Kevin Weiss Appointed to Institute of Medicine (IOM) Committee*

**Kevin Weiss, MD**, Director, MCHSPR, has been appointed to the Committee on Identifying Priority Areas for Quality Improvement. The project started January 2, 2002 and will last for 12 months. The project will, "provide advice to the Department of Health and Human Services (DHHS) for establishing a limited number of priority conditions (i.e., common, mostly chronic conditions that account for a large share of disease burden and health care resource use)." This comes after the recent IOM report, *Crossing the Quality Chasm: A New Health System for the 21st Century* which calls for fundamental reform of the health care delivery system.

More specifically, the IOM would: 1) Identify a possible set of criteria and a process that might be used by DHHS in designating priority areas; and 2) Identify a set of approximately 15 areas that might serve as the focus of initial redesign efforts.

The project includes three meetings and one workshop. A final report including the committee's recommendations will be presented at the end of the project.

More information on this project (HCSX-H-01-04-A) can be found online at <http://www.iom.edu>.

### *Increasing Influenza & Pneumococcal Vaccinations in VA SCI&D Population Funded*

Research has found that persons with spinal cord injury & disorders (SCI&D) are at increased risk of respiratory complications. Prevention of influenza and pneumonia and their subsequent respiratory complications through immunization is key. A study by Drs **Frances Weaver**, (Hines VA) and **Barry Goldstein** (Seattle VA) has recently been funded as part of the SCI Quality Enhancement Research Initiative (QUERI); "Increasing influenza & pneumococcal vaccinations in VA SCI&D population," HSR&D SCT 01-169, April 1, 2002- April 1, 2004. This national effort that builds on earlier pilot work with four SCI Centers, will implement a multiple strategy approach across all 23 VA SCI Centers; targeting patients, providers and the VA health care system to increase and maintain high vaccination rates and to subsequently reduce morbidity and mortality from respiratory complications in patients with SCI&D. System strategies including standing orders and computerized clinical reminders. Patient and provider strategies including mailed personalized reminders and educational materials will be implemented to promote vaccinations. This study hopes to demonstrate increased vaccination rates, decreased respiratory morbidity and mortality, and decreased cost when these strategies are used. Ultimately, these interventions will be integrated into each SCI Center so that these processes will become accepted as part of usual preventive care for veterans with SCI&D.

### *MCHSPR Developing New Affiliation with School of Pharmacy*

MCHSPR has recently begun an affiliation with the University of Illinois at Chicago (UIC) College of Pharmacy. **Todd A. Lee, PharmD, PhD**, a MCHSPR senior investigator and an adjunct assistant professor in the UIC College of Pharmacy, has been working with College of Pharmacy faculty to develop a relationship between MCHSPR and the College of Pharmacy. The intent of the relationship is to provide opportunities for educational exchange and foster collaborative research. The College of Pharmacy, which is located on the Health Sciences west campus of UIC, is the only public institution for pharmaceutical education in the state of Illinois. The College of Pharmacy is home to both the Department of Pharmacy Administration and the Department of Pharmacy Practice. The Department of Pharmacy Administration offers a graduate program in Pharmacy Administration, while the Center for Pharmacoeconomics Research is located in the Department of Pharmacy Practice. Faculty from both departments conduct research in areas that include pharmacoeconomics, quality of life, outcomes research, health services utilization, and pharmaceutical policy. Through the affiliation, the faculty from the Center for Pharmacoeconomics Research has offered to serve as mentors or project coordinators for fellows in the newly established MCHSPR post-doc fellowship and to allow fellows to participate in their UIC-sponsored seminar series, additional educational programs and courses. In addition to offering support and educational resources for post-doc fellows, affiliation between the two institutions brings together investigators with similar interests and affords the opportunity to participate in collaborative research projects.

---

## ***MCHSPR Begins Post Doctoral Fellowship Program***

MCHSPR was recently awarded an HSR&D post-doctoral fellowship program. MCHSPR responded to an RFA for the program in February, emphasizing an interest in mentoring fellows in the area of chronic care management. This is a wonderful opportunity to involve more young investigators in health services research. Our goal is to match fellows with mentors who have similar interests and want to work together.

Funding is available to support one fellow this year and two post-doctoral fellows in FY03. Persons interested in applying must be US Citizens with a PhD in a social science (e.g., psychology, health economics, public health) or allied health (e.g., pharmacy, nursing, rehab therapy) field and have a desire to pursue a career in health services research. Dr. Frances Weaver, Deputy Director, MCHSPR, will serve as the post-doctoral fellowship program director.

Applications are currently being accepted for a fellowship to start between July-September, 2002. For further information contact Dr. Weaver at 708-202-2414 or fax your CV and cover letter to Dr. Weaver at 708-202-2316.

## ***Dr. Charles Bennett Receives National Recognition with Pfizer Research Award***

**Charles Bennett, MD, PhD**, Associate Director of MCHSPR at Lakeside, has received funding from Pfizer to look at literacy issues in cancer research. The objective of this study is to evaluate an innovative intervention for improving the African American recruitment rates for SELECT (selenium and Vitamin E Prostate Cancer Prevention Trial).

SELECT is a double-blinded, placebo controlled, clinical trial that studies vitamin E and selenium in the prevention of prostate cancer funded by the National Cancer Institute and the Department of Veterans Affairs. Historically, minorities have been under-represented in clinical trials. The Health Belief Model (HBM) was developed to explain the widespread failure of people to engage in disease prevention. It has served as the framework for developing patient-directed intervention, and will utilize education materials specifically developed for the African American Veteran population. For the purposes of this study, the HBM has been modified and will be used to account for the benefits for the reference group mentioned above, instead of the individual.

The primary outcome measure will be the proportion of those eligible VA patients who enroll in SELECT. Secondary objectives will examine: 1) the association between low literacy and related knowledge attitudes, and beliefs toward prostate cancer and clinical trials; and 2) the association between patient knowledge, attitudes and beliefs toward prostate cancer prevention and clinical trials and recruitment to SELECT.

*One of the three  
"Best Poster"  
awards was given to  
Charlesnika Evans  
of SCI QUERI*

## ***Research Day 2002 a Huge Success***

On April 4, 2002 the Research and Development Program at Hines VA Hospital hosted their annual Research Day. Over one hundred twenty five exhibits and presentations were presented from five institutions. Among those participating were: Edward Hines Jr. VA Hospital, Hines, IL; Loyola University Medical Center, Maywood, IL; North Chicago VA Medical Center, North Chicago, IL; Great Lakes Naval Dental Institute, North Chicago, IL; and the Chicago Medical School, North Chicago, IL.

One of the three "Best Poster" awards was given to Charlesnika Evans of SCI QUERI and MCHSPR. Her poster was titled, "Managing Urinary Tract Infections in Veterans with Spinal Cord Injury." It reported on a study that reviewed medical records and clinical data to examine the variability in identification and management of recurrent UTI in the SCI population of two VA Medical Centers. The results indicate there is significant variation in the management of UTIs by site and by whether or not the UTI is recurrent. This work is the result of funding from the American Paraplegia Society (Weaver, PI) and support from the SCI QUERI.

MCHSPR investigators had a total of ten posters displayed as part of the 2002 VA Research Day festivities.

## ***Recent Publications***

Gibbons KC, Newlin RC, Phan L, **Bennett CL**. HBV Vaccination Program Reduces Liver Cancer in Taiwan. *Oncology News International*. 2002;11(4).

**Hynes DM, Stroupe K**, Greer J, Reda D, Frankenfield D, Kaufman J Henderson WG, Owen W, Rocco M, Wish J, Kang K, Fields K Feussner JR. Potential Cost Savings of Erythropoietin Administration in End-Stage Renal Disease. *American Journal of Medicine*. 2002;112:169-175.

Lee J, Calhoun E, Newlin R, **Bennett CL**. Assessing the Total Cost of Chemotherapy-Induced Toxicities. *Oncology News International*. 2002; 11(3).

**Lee TA, Weiss K**. An Update on the Health Economics of Asthma and Allergy. *Allergy and Clinical Immunology*. 2002; 2:195-200.

**Murphy PA**, Cowper DC, Seppala G, **Stroupe KT, Hynes DM**. Veterans Health Administration Inpatient and Outpatient Care Data: An Overview. *Effective Clinical Practice* 2002; 5:E4.

Newlin R, Lee J, **Bennett CL**. Financial and Lifestyle Impact of a Hairy Cell Leukemia Diagnosis. *Oncology News International*. 2002;11(5).

EDITORIAL DIRECTOR  
Kevin B. Weiss, M.D.

TECHNICAL DIRECTOR  
Frances M. Weaver, PhD

EDITORIAL ASSISTANT  
Carol Durczak

DESIGN/LAYOUT  
Madeline Thornton

Contributions or  
Suggestions should be addressed to:  
Madeline Thornton  
c/o HSR&D (151H)  
P.O. Box 5000  
Hines VA Hospital  
Hines, IL 60141-5151

**EDITORIAL  
CREDITS**